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CONFIRMATION NO. 8228

SERIAL NUMBER 10/804,932	FILING or 371(c) DATE 03/19/2004 RULE	CLASS 705	GROUP ART UNIT 4176	ATTORNEY DOCKET NO. AIJ-002	
APPLICANTS Anne-Marie Chalmers, Osprey, FL; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY ** 06/02/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SIND PHONGSVIRAJATI/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance STATE OR COUNTRY FL	SHEETS DRAWINGS 4	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 16
ADDRESS LAHIVE & COCKFIELD, LLP FLOOR 30, SUITE 3000 ONE POST OFFICE SQUARE BOSTON, MA 02109 UNITED STATES					
TITLE Method and system for centralized medication fulfillment					
FILING FEE RECEIVED 980	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		